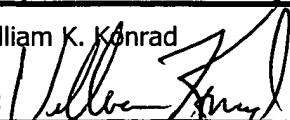


14202 U.S. PTO
121003

UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No.: 004486C01 First Inventor: PANCHAM Title: Coil and Coil Support for Generating a Plasma Express Mail Label No.: EV 326 952 497 US
APPLICATION ELEMENTS	ADDRESS TO:	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/SB/17) 2. <input type="checkbox"/> Applicant Claims Small Entity Status 3. <input checked="" type="checkbox"/> Specification – Total pages: <u>27</u> Descriptive Title of the Invention Cross Reference to Related Applications Background of the Invention Brief Summary of the Invention Brief Description of the Drawings Detailed Description Claim(s) Abstract 4. <input checked="" type="checkbox"/> Drawings – Total sheets: <u>6</u> Informal <u>6</u> Formal 5. Oath or Declaration – Total pages: _____ B. <input type="checkbox"/> Newly executed C. <input checked="" type="checkbox"/> Copy from prior application i. <input type="checkbox"/> Deletion of Inventor(s) 6. <input checked="" type="checkbox"/> Application Data Sheet (37 CFR 1.76)		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or computer program 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence submission A. <input type="checkbox"/> Computer Readable Form B. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies) ii. <input type="checkbox"/> paper C. <input type="checkbox"/> statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS: 9. <input type="checkbox"/> Assignment Papers 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney 11. <input type="checkbox"/> English Translation Document 12. <input type="checkbox"/> Information Disclosure Statements/ PTO-1449 <input type="checkbox"/> Copies of Citations 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard 15. <input type="checkbox"/> Certified copy of priority document(s) 16. <input type="checkbox"/> Nonpublication Request under 35 USC 122 17. <input type="checkbox"/> Other:
17. IF A CONTINUING APPLICATION <i>check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</i> <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application number: <u>09/515,880</u> Examiner: <u>J. Vu</u> Group/Art Unit: <u>2821</u> For Continuation or Divisional apps only: the entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.		
18. CORRESPONDENCE ADDRESS		
Customer Number or Bar Code Label:		
Name: Address:	Patent Counsel	APPLIED MATERIALS, INC. Post Office Box 450A Santa Clara, CA 95052
Name: William K. Konrad Signature: 		Reg. No. 28,868 Date: <u>12/10/03</u>

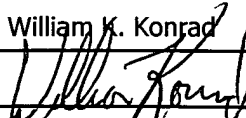
22141 U.S. PTO
10/733983

121003

FEE TRANSMITTAL	Application Number	not yet assigned
for FY 2003	Filing Date	December 10, 2003
	First Named Inventor	PANCHAM
	Group Art Unit	
	Examiner Name	
Total Amount of Payment: \$ 1610.00	Attorney Docket Number	004486C01

<p>METHOD OF PAYMENT (check one)</p> <p><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card</p> <p><input checked="" type="checkbox"/> Deposit Account: Number: 50-0585 Name: Konrad Raynes & Victor LLP</p> <p>The Commissioner is authorized to:</p> <p><input type="checkbox"/> charge fee(s) indicated below</p> <p><input checked="" type="checkbox"/> charge any deficiency or credit any overpayment to the above-identified deposit account.</p> <p>FEE CALCULATION</p> <p>1. BASIC FILING FEE</p> <p>Utility Filing Fee:</p> <p>Large Entity Fee Code 101 \$</p> <p>SUBTOTAL (1) \$ 770</p> <p>2. EXTRA CLAIM FEES</p> <p>Total Claims <u>38</u> - 20* x \$18 = \$ 324</p> <p>Independent</p> <p>Claims <u>9</u> - 3* x \$86 = \$ 516</p> <p>Multiple Dependent \$290 \$</p> <p>SUBTOTAL (2) \$ 1610</p> <p>*(or number previously paid for)</p>	<p>FEE CALCULATION (continued)</p> <p>3. ADDITIONAL FEES (large entity)</p> <p><input type="checkbox"/> Surcharge - late filing fee or oath \$130</p> <p><input type="checkbox"/> Surcharge - late provisional filing fee or cover sheet \$50</p> <p><input type="checkbox"/> Non-English specification \$130</p> <p><input type="checkbox"/> International type search report \$40</p> <p><input type="checkbox"/> Requesting publication of SIR prior to action \$920</p> <p><input type="checkbox"/> Requesting publication of SIR after action \$1840</p> <p><input type="checkbox"/> Extension for reply - first month \$110</p> <p><input type="checkbox"/> Extension for reply - second month \$420</p> <p><input type="checkbox"/> Extension for reply - third month \$950</p> <p><input type="checkbox"/> Extension for reply - fourth month \$1480</p> <p><input type="checkbox"/> Extension for reply - fifth month \$2010</p> <p><input type="checkbox"/> Notice of Appeal \$330</p> <p><input type="checkbox"/> Brief in Support of Appeal \$330</p> <p><input type="checkbox"/> Request for Oral Hearing \$290</p> <p><input type="checkbox"/> Utility issue fee \$1330</p> <p><input type="checkbox"/> Petition to revive (unavoidable) \$110</p> <p><input type="checkbox"/> Petition to revive (unintentional) \$1330</p> <p><input type="checkbox"/> Petitions to the Commissioner \$130</p> <p><input type="checkbox"/> Petitions related to provisional applications \$50</p> <p><input type="checkbox"/> Submission of Information Disclosure Statement \$180</p> <p><input type="checkbox"/> Recordation of Assignment \$40</p> <p><input type="checkbox"/> Submission after final (37 CFR 1.129(a)) \$770</p> <p><input type="checkbox"/> Request for Continued Examination (RCE) \$770</p> <p><input type="checkbox"/> Other:</p> <p>SUBTOTAL (3) \$ 1610.00</p>
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Submitted by:

Firm or Individual Name:	William K. Konrad	
Signature:		
Reg. No: 28,868	Telephone: 810-556-7983	Date: 12/10/03